INDIANA DEPARTMENT OF TRANSPORTATION 100 North Senate Avenue Indianapolis, Indiana 46204

Letting of January 10, 2007

January 5, 2007

NOTICE TO BIDDERS

CONTRACT NO. R-28825-A

This is to advise you that the Proposal Book has been revised as follows: The forms DBE Affirmative Action Certification and Attachment CM 32-34: Certificate with Regard to the Performance of Previous Contracts or Clause and the Filing of Required Reports have been deleted. The Minority and Women's Business Enterprises Participation Plan and Good Faith Efforts Worksheet forms have been added; the Table of Contents has been revised. The added and revised pages are included herewith.

Please substitute the attached sheets for the like numbered sheets that now appear in your copy of the bidding document.

Should you desire to submit a bid, please do so on the basis of the information set out above.

This will be posted on the Internet at:

www.in.gov/dot/div/contracts/letting/index.html

The acknowledgment below should be signed only by prequalified bidders and returned immediately upon receipt by facsimile transmission through FAX No. 317-232-0676. If no FAX is available, the acknowledgment should be returned by mail to Mr. Michael R. Beuchel, Bid Review and Estimate Manager, N855 Indiana Government Center North, 100 North Senate Avenue, Indianapolis, IN 46204-2218.

Michael R. Beuchel Bid Review and Estimate Manager

MRB//bls

- ACKNOWLEDGMENT OF RECEIPT OF REVISION -

DATE	
CO. NAME	
BY	

BEFORE SUBMITTING BIDDING DOCUMENT, PLEASE BE SURE TO INSERT ALL APPROPRIATE SIGNED REVISION ACKNOWLEDGMENTS.

PROPOSAL TABLE OF CONTENTS

CONTRACT NO.

This book shall be examined to determine that each page set out in this Table of Contents is attached, legible, and current.

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Contract	Bid	Amount	
MBE Goal		%	
WBE Goal		_%	

MINORITY AND WOMEN'S BUSINESS ENTERPRISES PARTICIPATION PLAN

A Respondent is expected to submit in each response a Minority and Women's Business Enterprises Participation Plan in accordance with IC 4-13-16.5 and 25 IAC 5. The Plan must show that there are, participating in the proposed contract, Minority Business Enterprises (MBE) and Women Business Enterprises (WBE) listed in the Minority and Women's Business Enterprises Division (MWBD) directory of certified firms. Respondents must indicate the name of the MBE and WBE with which it will work, the contact name and phone number at the firm(s), the service supplied by the firm(s), the specific dollar amount from this contract that will be directed toward each firm, and the approximate date these products and/or services will be utilized. If participation is met through use of vendors who supply products and/or services, the Respondent must also indicate the vendor's tax ID number as well as provide a description of products and/or services provided to the Respondent that are directly related to this proposal and the cost of direct supplies for this proposal. All prime contractors, including MBE and WBE prime contractors, must meet the contract goals through use of subcontractors. MBE and WBE prime contractors will get no credit toward the contract goal for the use of its own workforce. The State does not accept national plans.

Failure to meet these requirements will affect the evaluation of your Proposal. The Department reserves the right to verify all information included in the Plan.

Respondents are encouraged to contact and work with MWBD to design a plan to meet established goals. MWBD's website address is www.IN.gov/idoa/minority and contains a complete list of all the Department's certified MBE's and WBE's.

Minority & Women's Business Enterprises Participation Letter of Commitment

A signed letter(s), on company letterhead, from the MBE and/or WBE must accompany the Plan. This letter(s) shall state and will serve as acknowledgement from the MBE and/or WBE of its amount of participation, the scope of products and/or services, and approximate date these products and/or services will be utilized.

By submission of the Proposal, the Respondent acknowledges and agrees to be bound by the regulatory processes involving the State's M/WBE Program. Ouestions involving the regulations governing the Plan should be directed to MWBD's Compliance Unit at 317/232-3061

MBE/WBE PARTICIPATION PLAN Contract Number ______ BID DATE ______ RESPONDENT ______ ADDRESS _____ CITY/STATE/ZIP ______ PHONE () ______ The following MBE and/or WBE's listed in the MWBD directory will be participating in the contract: MBE/WBE PHONE COMPANY NAME SCOPE OF PRODUCTS AND/OR SERVICES UTILIZATION DATE AMOUNT

*If additional room is necessary, indicate here_____. Please attach a separate page.

THIS DOCUMENT MUST BE INCLUDED IN YOUR RESPONSE

Indiana Department of Transportation GOOD FAITH EFFORTS WORKSHEET

BIDDER				COl	NTRACT NUM	MBER	
CONTRACT GOALS		_% N	ИВЕ	% WB	BE		
List the M/WBEs contacted be maintained.	d and o	compl	ete the followi	ng informatio	n for each. Cop	pies of all communi	cations to and from each vendor should
Company Name and Address	MBE	WBE	Type of Contact	Date of Contact	Date Response Due	Goods Or Services Requested	Result (Include Price Quote)
the efforts that you want	to be Vorks	cons	sidered. A co	mplete descr	iption of each	n criterion may be	e considered. Please provide evidence of found in the Indiana Department of ion Policy at the following website.
MBE and WBE Barrier Assistance		Des	scribe				
Advertisement		Des	scribe				
Agency Assistance		Des	scribe				
Other Criteria		Des	scribe				